

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

PLAINTIFF UNITED STATES OF AMERICA	COURT CASE NUMBER CA No. 04-10642-RWZ
DEFENDANT 928 Oakley Street, New Bedford, Massachusetts	TYPE OF PROCESS Complaint and Warrant and Monition

**SERVE
AT**

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

JOYCE C. MEDEIROS

ADDRESS (Street or RFD, Apartment No., City, State, and ZIP Code)

928 Oakley Street, New Bedford, Massachusetts 02745

SEND NOTICE OF SERVICE TO REQUESTER AT NAME AND ADDRESS BELOW:

Shelbey D. Wright, Assistant U.S. Attorney
United States Attorney's Office
John Joseph Moakley United States Courthouse
1 Courthouse Way, Suite 9200
Boston, MA 02210

Number of process to be served
with this Form - 285Number of parties to be served
in this case

Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Address, All Telephone Numbers, and Estimated Times Available For Service)

Please serve the attached Verified Complaint and Warrant & Monition upon the above-referenced individual by certified mail, return receipt requested.

KBW x3364

Signature of Attorney or other Originator requesting service on behalf of:

☒ PLAINTIFF
☐ DEFENDANT

TELEPHONE NUMBER

(617) 748-3100

DATE

May 7, 2004

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total
number of process indicated.
(Sign only first USM 285 if more than
one USM 285 is submitted)Total Process
No. _____District of Origin
No. 38District to Serve
No. 38

Signature of Authorized USMS Deputy or Clerk

Date

5/17/04I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc. at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☒ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below).

Name and title of individual served (If not shown above).

☐ A person of suitable age and discretion then
residing in the defendant's usual place of abode.

Address (complete only if different than shown above)

Date of Service

6/7/04

Time

am

pm

Signature of U.S. Marshal or Deputy

Service Fee

Total Mileage Charges
(including endeavors)

Forwarding Fee

Total Charges

Advance Deposits

Amount Owed to US Marshal or

Amount or Refund

REMARKS:

5/17/04 Certify # 7002 0510 0004 354.3 73 71
Returned Undelivered

7PRIOR EDITIONS MAY
BE USED

1. CLERK OF THE COURT

FORM USM 285 (Rev. 12/15/80)

☐ USMS RECORD☐ NOTICE OF SERVICE☐ BILLING STATEMENT☐ ACKNOWLEDGMENT OF RECEIPT